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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBE	R: 105400002		CITY OR TOWN	RUSSELL
APPLICATION FO	R RENEWAL:	Annual CLASS	LICEN	SED FOR 2013 YEAR
LICENSEE NAME: DOING BUSINESS ADDRESS RTE. 20				
CITY/TOWN: RUS	SSELL	STATE: MA	ZIP CODE:	01071
MANAGER: PEL CHR	USO, TYPE RISTOPHER	E OF LICENSE:Inn	holder CA	ATEGORY: All Alcohol
EMAIL ADDRESS:				
	PLEASE ALSO VISIT OUR WEB		MAIL ADDRESS	
	LICENSED PREMISE			AMEGHEN AND
	UTE 20. FIRT FLOOR REA AND ADJACEN			
2. the licens	yed license will be of the see has complied with a sees are now open for be Individual, Partner o	ll laws of the Comrusiness (If not expla	nonwealth relating to	
DATE:	TELEPHONE	NUMBER:		R IDENTIFICATION NUMBER:
Acts of 2004, signe	d by the building insp	ector and the head	l of the fire departi	ed by Chapter 304 of the ment for the above named r 116 of the Acts of 2010.
Please Check Below: APPROVED: DISAPPROVED: [(If disapproved expl	ain)		LOCAL LICENS By:	SING AUTHORITY
DATE:				



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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 105400005	(CITY OR TOWN RUSSELL	
APPLICATION FOR RENEWAL:	Annual	LICENSED FOR 2013	
	CLASS		YEAR
LICENSEE NAME: GENERAL KNO DOING BUSINESS A ADDRESS WESTFIELD RD.)X POST #6645 V.F.W.	INC.	
CITY/TOWN: RUSSELL	STATE: MA	ZIP CODE: 01071	
	YPE OF LICENSE: Vete		All Alcohol
EMAIL ADDRESS:			
PLEASE ALSO VISIT OUR	WEBSITE AND ENTER YOUR EMA	AIL ADDRESS	_
DESCRIPTION OF LICENSED PREM	IISES:		
the licensee has complied with a second	th all laws of the Comm	onwealth relating to taxes; and n below)	
DATE: TELEPHO	ONE NUMBER:	EMPLOYER IDENTIFICATION (Note: NOTE) Individual Social S	
We the undersigned, attest that we a Acts of 2004, signed by the building i license and (2) the certificate of liquo	inspector and the head	of the fire department for the	above named
Please Check Below: APPROVED: DISAPPROVED: (If disapproved explain)		LOCAL LICENSING AUTH By:	ORITY
DATE:			



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OFF-PREMISESLICENSE RENEWAL APPLICATION

LICENSE NUMBER: 105400007		CITY OR TOWN RUSSELL		
APPLICATION FOR RENEWAL:	Annual	ual LICENSED FOR 2013		
	CLASS		YEAR	
LICENSEE NAME: ANIELLO PI	ELUSO			
DOING BUSINESS A RUSSELL 1	PACKAGE STORE & DE	LI, INC.		
ADDRESS WESTFIELD & HUNT	INGT			
CITY/TOWN: RUSSELL	STATE: MA	ZIP CODE: 01071		
MANAGER: PAULSON, JOSEPHINE	TYPE OF LICENSE:Pac	kage Store CATEGORY	All Alcohol	
EMAIL ADDRESS:				
PLEASE ALSO VISIT	OUR WEBSITE AND ENTER YOUR EN	MAIL ADDRESS		
DESCRIPTION OF LICENSED PR	REMISES:			
WEST SIDE OF ROUTE 20. ONE ROOM STORAGE	STORY FRAME BUILDI	NG, ONE ROOM STORE ANI	OONE	
2. the licensee has complied 3. the premises are now open SIGNED BY:		nonwealth relating to taxes; and ain below)		
	artner or Authorized Corpo	orate Officer		
DATE: TELEF	PHONE NUMBER:	EMPLOYER IDENTIFICA (Note: <u>NOT</u> Individual Social		
Please Check Below: APPROVED: DISAPPROVED: (If disapproved explain)		LOCAL LICENSING AUTH By:	IORITY	
DATE:				



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OFF-PREMISESLICENSE RENEWAL APPLICATION

LICENSE NUMBER: 105400008			CITY OR TOWN RUSSELL		
APPLICATION FOR RENEWAL:		Annual	LICENSED FOR	SED FOR 2013	
		CLASS		YEAR	
DOING BUSI		TY INVESTMENTS, INC MP PIZZ AND SPIRITS	2.		
CITY/TOWN:		STATE: MA	ZIP CODE: 01071		
MANAGER:	PERRON, CHRISTOPNER	TYPE OF LICENSE:P		Y: All Alcohol	
EMAIL ADDF	RESS:				
	PLEASE ALSO VISIT	OUR WEBSITE AND ENTER YOUR	EMAIL ADDRESS		
DESCRIPTIO:	N OF LICENSED PI	REMISES:			
2. the	licensee has complie premises are now op	· =		ad .	
DATE:	TELE	PHONE NUMBER:	EMPLOYER IDENTIFIC (Note: NOT Individual Socie		
Please Check Belo APPROVED: DISAPPROVI (If disapproved	ED:		LOCAL LICENSING AUT By:	THORITY	
DATE:					